



Child's name: \_\_\_\_\_ Male: \_\_\_ Female: \_\_\_

Date of Birth (month, date, year): \_\_\_\_\_

Parent(s)/Guardian(s): \_\_\_\_\_

Main Contact Phone Number: \_\_\_\_\_

Address: \_\_\_\_\_

**SCHEDULE REQUESTED**

3 year old class (3 by September 30<sup>th</sup>) T/TH \_\_\_\_\_ 8:30-12:30 \_\_\_\_\_ 8:30-3:30 \_\_\_\_\_

4 year old class (4 by September 30<sup>th</sup>) M/W/F \_\_\_\_\_ 8:30-12:30 \_\_\_\_\_

4 year old class (4 by Sept. 1<sup>st</sup>) Two days a week \_\_\_/\_\_\_ 8:30-12:30 \_\_\_\_\_ 8:30-3:30 \_\_\_\_\_

4 year old class (4 by Sept. 1<sup>st</sup>) Three days a week \_\_\_/\_\_\_/\_\_\_ 8:30-12:30 \_\_\_\_\_ 8:30-3:30 \_\_\_\_\_

4 year old class (4 by Sept. 1<sup>st</sup>) Four days a week \_\_\_/\_\_\_/\_\_\_/\_\_\_ 8:30-12:30 \_\_\_\_\_ 8:30-3:30 \_\_\_\_\_

4 year old class (4 by September 1<sup>st</sup>) Monday thru Friday \_\_\_\_\_ 8:30-12:30 \_\_\_\_\_ 8:30-3:30 \_\_\_\_\_

Extended Care Hours: AM extended care 8:00-8:30 \_\_\_\_\_ PM extended care 3:30-5:30 \_\_\_\_\_

Please circle all the ways below how you heard out about our school:

- \* Attended Previously/Sibling   \* Our Preschool Website   \* Cross of Hope Church Member
- \* Internet Search   \* Accredited School Search   \* Church Sign/Live in Neighborhood
- \* Friend Referral   \* Albuquerque The Magazine/Best of City   \* New Mexico Kids Magazine
- \* Albuquerque Moms Blog   \* Word of Mouth   \* Other \_\_\_\_\_

Our \$200 NON-REFUNDABLE registration fee must accompany this form in order to reserve your child's place in our program. Make checks payable to COHP